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Abstract Book

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NO: 4 P***Assessment of incidence and outcome of fetal hydronephrosis prenatally diagnosed by ultrasound in Tabriz Uuniversity (2001 – 2004)***

Refahi, S., MD.;Tazakori, Z., MD.; Pourissa, M., MD.; Nazari, H., MD.

ABSTRACT:

The purpose of this study was to demonstrate the prenatal and postnatal investigation and outcome of infants with hydronephrosis prenatally diagnosed by ultrasound between 2001 and 2004. In a three – year period, we identified 211 cases (271 renal units) of fetal hydronephrosis in which renal pelvic anteroposterior diameter was more than the normal diameter at various stages of pregnancy. Incidence of fetal hydronephrosis was 3. 8 percent in the 55. 500 fetuses screened by ultrasound. A total of 187 fetus (240 renal units) follow ups underwent postnatal sonography; only in ten cases renal pelvic Anteroposterior diameter increased greater than 15 mm that required surgical correction. The most important advantage of knowing that a fetuses has ultrasound findings of persistent hydronephrosis is to be able to begin timely evaluation of the newborn to identify the severity of hydronephrosis and prevent progressive deterioration of renal function.

NO: 5 P***Laparoscopic Ureteral Reimplantation in ureterovesical Junction Obstruction, Transperitoneal and Extraperitoneal Method. Initial Report***

Simforoosh. N, F. MA. Beygi

Purpose: we present 2 cases of ureterovesical junction obstruction (UVJO) which was successfully treated by laparoscopic interaperitoneal reimplantation in one case and laparoscopic extraperitoneal reimplantation with ureteral tailoring in the other case. To our knowledge these are the first reports of laparoscopic ureteral reimplantation with tailoring (one case) in UVJO.

Patients and methods: Two patients with symptomatic UVJO that confirmed in imaging, underwent laparoscopic ureteral reimplantation by Lich Gregoir extravesical technique (with two different methods of intra and extra peritoneal). Ureteral tailoring was done in patient with extraperitoneal method.

Results: The duration of operations was 75 and 120 minutes for intra and extraperitoneal method, respectively. There were no intra operative or postoperative problems. Cystoscopy and stent removal was done after 6 weeks. Intravenous urograms were done at the end of 3 months and showed prompt functioning of the kidneys with normal drainage and no leakage. Voiding cystourethrography of patients at 3 months showed no evidence of reflux. Furthermore, the patients did not have any further symptoms after 2 years of follow up.

Conclusions: Laparoscopic ureteral reimplantation in UVJO is a feasible and safe procedure. Symptoms disappeared postoperatively in both cases with considerable improvement.

This can be offered a minimally invasive approach in management of UVJO with its advantage of better cosmetic result and short convalesce.

NO: 6 P***Non-steroid, anti-inflammatory drugs in the treatment of nocturia:***

Shadab. A, MD,

Introduction: The present study was performed to find out the response level of patients with nocturia who are resistant to common anticholinergic therapies.

Materials & Methods:

In 14 months, 121 patients with irritative urine symptoms and nocturia underwent urologic studies including history, clinical visits, blood tests, urinalysis, sonography, and when needed, cystoscopy. Among these, 102 patients without any underlying factors were cadidated for urodynamic tests. In 97 of them, a hyper-active bladder was found. There was a random sampling as follows:

Group I: 43 patients underwent treatment with Propantelene; and